

### CHILD CARE AND DEVELOPMENT FUND PLAN

### **FOR**

#### FFY 2004-2005

This Plan describes the CCDF program to be conducted by the State for the period 10/1/03 - 9/30/05. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

The official text of the applicable laws and regulations govern, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

Public reporting burden for this collection of information is estimated to average 162.57 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

(Form ACF 118 Approved OMB Number: 0970-0114 expires 02-29-2004)

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#### **AMENDMENTS LOG**

Child Care and Development Services Plan for For the period: 10/1/03 -- 9/30/05

SECTION AMENDED	EFFECTIVE/ PROPOSED EFFECTIVE DATE	DATE SUBMITTED TO ACF	DATE APPROVED BY ACF

#### Instructions:

- 1) Lead Agency completes the first 3 columns and sends a photocopy of this Log (showing the latest amendment sent to ACF) <u>and</u> the amended section(s) to the ACF Regional contact. A copy of the Log, showing the latest amendment pending in ACF, is retained in the Lead Agency's Plan.
- 2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
- 3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the <u>same</u> Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain those "old" plan pages that are superseded by amendments in a separate appendix to its Plan.

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#### **PART 1 -- ADMINISTRATION**

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E)

## **1.1 Lead Agency Information** (as designated by State chief executive officer)

Name of Lead Agency: Washington State Department of Social and Health Services

Address of Lead Agency: 1115 Washington Street SE

P.O. Box 45000

Name and Title of the **Olympia, Washington 98504-5010** 

Lead Agency's Chief Executive Officer: Dennis Braddock, Secretary

Phone & Fax Numbers: **Phone (360) 902-7800** 

Fax (360) 902-4723

# 1.2 State Child Care (CCDF) Contact Information (day-to-day contact)

Name and Title of the

State Child Care Contact (CCDF): Rachael Langen, Director

Address of Contact: Division of Child Care and Early Learning

PO Box 45480

Olympia, WA 98504-5480

Phone & Fax Numbers: Phone (360) 413-3209

E-Mail Address: Fax (360) 413-3482

langera@dshs.wa.gov

#### 1.3 Estimated Funding

The Lead Agency <u>estimates</u> that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2003 through September 30, 2004. (§98.13(a))

- -CCDF: \$
- -Federal TANF Transfer to CCDF (if known): \$
- -Direct Federal TANF Spending on Child Care (if known): \$
- -State CCDF Maintenance of Effort Funds: \$
- -State Matching Funds: \$
- -Total Funds Available: \$

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1.4	The Lead Agency estimates that the following amount (and percentage) of the CO	CDF
	will be used to administer the program (not to exceed 5 percent): \$	_(
	%). (658E(c)(3), §§98.13(a), 98.52)	

- 1.5 Does the Lead Agency directly administer and implement <u>all</u> services, programs and activities funded under the CCDF Act, <u>including</u> those described in Part 5.1 Activities & Services to Improve the Quality and Availability of Child Care, Quality Earmarks and Set-Aside?
  - ( ) Yes. GO to Section 1.8.
  - (X) No, and the following describes how the Lead Agency maintains overall control when services or activities are provided through other agencies. (658D(b)(1)(A), §98.11)

The Department of Social and Health Services (DSHS) will retain overall responsibility for program administration including: 1) serving as single point of contact regarding administration of funds; 2) determining use and priorities for block grant expenditures; 3) promulgating rules and regulations governing administration; 4) submitting required reports; 5) ensuring compliance with the plan and federal requirements; 6) overseeing expenditures of funds to subgrantees and contractors; 7) monitoring programs and resources; 8) fulfilling responsibilities related to complaints, compliance, hearings, and/or appeal actions.

DSHS will develop written agreements, which specify the mutual roles and responsibilities of the lead agency and other agencies in meeting requirements under 98.11. Funds related to these activities will be transferred to the appropriate agency under written agreement. The agreement will specify that agencies carrying out program activities will comply with the approved state plan and federal regulations including providing such information as is necessary to DSHS to provide overall administration and reporting.

**1.6** For child care services funded under §98.50 (i.e., certificates, vouchers, grants/contracts

for slots based on individual eligibility), does the Lead Agency itself: (§98.11)

• Determine individual eligibility of non-TANF families? YES X NO If NO, identify the name and type of agency that determines eligibility of non-TANF families for child care:

All Non-TANF working families who are low income, involved in an approved Economic Services Administration or involved with Children's Administration (DSHS), have their eligibility determined by the lead agency. The only exception is for the Seasonal Child Care Program for

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which eligibility criteria is determined by DSHS and implemented under

		conditions in contract through private non-profit organizations.
		• Determine individual eligibility of TANF families? YES <b>X</b> NO <b>If NO</b> , identify the name and type of agency that determines eligibility of TANF families for child care:
		• Assist parents in locating child care? YES NO_X_ If NO, identify the name and type of agency that assists parents:
		Statewide Child Care Resource and Referral Services assist parents in locating child care. The lead agency has several ways to link families with the R&R which performs the referral services to locate child care.
		<ul> <li>Make payments to providers? YES_X NO</li> <li>If NO, identify the name and type of agency that makes payments:</li> </ul>
		Note: In the case of payment for in-home chld care, payment is made to the parent who in turns pays the provider.
1.7	-	y entity named in response to section 1.6 a non-governmental entity? (658D(b), .10(a), 98.11(a))
	( <b>X</b> )	No. Yes, the following entities named in section 1.6 are non-governmental:
<u>Section</u>	on 1.8 -	Use of Private Donated Funds
1.8.1		the Lead Agency use private donated funds to meet a part of the matching rement of the CCDF pursuant to §98.53(e)(2) and (f)?
	( )	No. GO TO 1.9  Yes. The name and type of entity designated to receive private donated funds is:  Name: Address:

Type: (government/private non-profit/private for-profit)

# <u>Section 1.9 - Use of State Pre-Kindergarten (Pre-K) Expenditures for CCDF-Eligible Children</u>

1.9.1	During this plan period, will State expenditures for Pre-K programs be used to meet <u>any</u> of the CCDF maintenance of effort (MOE) requirement?
	( ) No. (X) Yes,
	$\underline{X}$ The State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to §98.53(h)(1).
	Estimated % of the MOE requirement that will be met with pre-K expenditures. (It may not exceed 20%.)
	If the State uses Pre-K expenditures to meet <u>more</u> than 10% of the MOE requirement, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):
1.9.2	During this plan period, will State expenditures for Pre-K programs be used to meet <u>any</u> of the CCDF Matching Fund requirement? (§98.53(h))
	( ) No. (X) Yes, and
	Estimated % of the Matching Fund requirement will be met with pre-K expenditures. (It may not exceed 20%.)
	If the State uses Pre-K expenditures to meet <u>more</u> than 10% of the Matching Fund requirement, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):
	1. The lead CCDF agency is working with leadership from the federal Region X Child Care-Head Start team, the State Pre-K program (Early Childhood and Assistance Program or (ECEAP), the Governor's Head

Start-State Collaboration Office and CCDF funded subsidy programs to expand the availability child care. In Partnership, the Head Start-State Collaboration Office, DCCEL and the Department of Health, Healthy Child Care Washington are developing a sophisticated database to map the standards and regulations of the large Early Childhood Care and

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Education (ECCE) programs in Washington State. The programs to be mapped are as follows: Child Care, Early Childhood Education Assistance Program (state pre-k), Head Start, Early Head Start, and the USDA Food Program. Specific regulations and standards from these programs will be compared with national benchmarks (NAEYC and Caring for our Children National Health & Safety Standards: Guidelines for Out-of-Home Child Care Programs). Additionally, the regulations and standards will be mapped/ranked for multiple. The goal of this "Mapping Standards and Regulations Project" is to identify new paths for streamlining ECCE services in Washington. Ultimately this will lead to more efficient and effective collaboration between programmatic funding streams and lending to more full day /full year pre-K services for the targeted population.

On May 8, 2002, a Braided Funding Think Tank which was comprised of a group of state, Federal and local early childhood professionals met to consider current barriers to using multiple sources of funding for early childhood programs and strategies for facilitating this process. Participants identified fiscal and policy successes and challenges and included representatives from:

- Region X, Department of Health and Human Services, Administration for Children and Families;
- Governor's Head Start-State Collaboration Office
- State Departments of Social and Health Services (Division of Child Care and Early Learning, Governor's Head Start State Collaboration Project and Developmental Disabilities Council), Health, Community, Trade and Economic Development (ECEAP); and the
- Office of Superintendent of Public Instruction;
- Washington State Association of Head Start and Early Childhood Education and Assistance Programs;
- Foundation for Early Learning;
- Northwest Finance Circle, City of Seattle;
- Nisqually and Skokomish Tribes; and
- Numerous local and early childhood programs which blend funding from a variety of State and Federal sources.
- 2. The state is currently in the process of updating the agreements between these agencies. The guidelines will be in accordance with the recent letter issued by the Child Care Bureau and Head Start Bureau. Revisions to the Funding Guidelines for Programs Using Blended Model to Provide Full-day Services are not available at this time as an attachment.

A workgroup is continuing to explore the possibility of maintaining child care subsidy eligibility through the Head Start and ECEAP program

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year, once eligibility is initially determined. It is also working on appropriate mechanisms for accounting of funds in jointly funded fullday programs which blend pre-K and child care. Any updated agreements reached by the workgroup will need to consider the guidelines developed. Additionally, the Vendor Contracting Practices Task Force was convened by the State of Washington Office of Financial Management to provide guidelines regarding the braiding of funds from different sources.

Efforts are underway to link our Pre-K and Head Start programs with other state programs such as the Child Care Facility Fund. This allows these quality Pre-K programs to be promoted for their ability to add value to child care projects in search of funding from the Child Care Facility Fund.

1.9.3 If the State answered yes to 1.91 or 1.9.2, the following describes State efforts to ensure that pre-K programs meet the needs of working parents (§98.53(h)(2)):

> Individual pre-K/ Early Childhood Education and Assistance Programs (ECEAP) part day programs are encouraged to link with full-day community-based child care programs. Technical assistance is available to support these local efforts. Many Head Start and ECEAP programs provide technical assistance over a period of years to guide child care providers to the level of quality and comprehensiveness that they can become subcontractors for full-day pre-K services. The Foundation for Early Learning gave \$150,000 to Puget Sound Educational Services District a similar purpose in July 2002-June 2003. Can this be counted? Others are no doubt possible too. Please Delete!!!!...old news!

> Local child care providers are encouraged to consider collaborative approaches to develop full-day programs enriched with ECEAP and Head Start pre-K services. A package of services is provided delivering child care, medical exams, home visits and family support activities, through collaborative funding and service delivery among K-12, Head Start/ECEAP, Health Services and Child Care providers. Additionally, Head Start and Early Head Start programs are providing resources for professional development for the child care staff in programs that partner to provide full-day/full-year services.

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#### Part 2--DEVELOPING THE CHILD CARE PROGRAM

#### 2.1 - Consultation and Coordination

- 2.1.1 Consultation. Describe the consultation the Lead Agency held in developing this Plan and the results of that consultation. At a minimum, the description must include the following:
  - Representatives of local governments;
  - Tribal organizations when such organizations exist within the boundaries of the State. (658D(b)(2), §§98.12(b), 98.14(b))

The lead agency consulted with the Child Care Coordinating Committee (CCCC), along with its Subsidy, and Systems Subcommittees. This statutorily established committee includes representatives from local government and communities. The tribes have added a tribal workgroup. The CCCC makes recommendations to state agencies and the legislature in its annual report.

#### (Please see:

Attachment 1) CCCC December 2001 Annual Report To The Legislature-The Child at the Center: Falling Through the Financial Gaps in the Early Care and Out-of-School-Time System; and

Attachment 2) CCCC December 2002 Constructing Bridges: A path of learning from birth to K-12 schools).

#### According to statute, membership of the committee include:

- One representative each from the Department of Social and Health Services (DSHS), the Department of Community, Community Trade and Economic Development (DCTED), the Office of Superintendent of Public Instruction (OSPI), the Department of Health (DOH), the Department of Personnel (DOP) and any other agency having responsibility for regulation, provision, or funding of child care services in the state;
- One representative from the Department of Labor and Industries (L&I);
- One representative from the Department of Revenue (DOR);
- One representative from the Employment Security Department (ESD);
- At least one representative of family home child care providers and one representative of center care provider;
- At least one representative of early childhood development experts;
- At least one representative of school districts and teachers involved in the provision of child care and preschool programs;
- At least one parent education specialist;
- At least one representative of resource and referral programs;
- One pediatric or other health professional;
- At least one representative of college and university child care providers;
- At least one representative of a citizen group concerned with child care;

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- At least one representative of a labor organization;
- At least one representative of a Head Start-Early Childhood Education Assistance Program agency;
- At least one employer who provides child care assistance to employees;
- Parents of children receiving, or in need of, child care, half of whom shall be parents needing or receiving subsidized child care and half of whom shall be parents who are able to pay for child care.

The Tribal-State Workgroup, which is convened by Region X/DHHS Child Care Team, includes representation from the lead agency's Division of Child Care and Early Learning (DCCEL). This Workgroup, composed of representatives from all 26 Indian tribes within the state, resolves major issues such as: Indian dual eligibility; accessibility to child care subsidy programs; state certification for payment in tribally licensed facilities; improvement of communication so tribes are notified of available quality improvement grants; state-wide DSHS policy interpretation; state-wide health and safety standards for tribally licensed child care facilities.

2.1.2 Coordination. Lead Agencies are required to coordinate with other Federal, State, local, tribal (if applicable), and private agencies providing child care and early childhood development services.

Check any of the following services provided by agencies with which the Lead Agency coordinates. In each case identify the agency providing the service and describe the coordination and expected results:

	Public health including programs that promote children's emotional
	and mental health
	Healthy Child Care America Campaign
	Employment services
	Public education
X	TANF

TANF is part of Economic Services Administration and TANF clients can now receive TANF benefits and child care at the same time thus providing better service to families. The 2001 reorganization of licensed child care and early learning functions has led to improved consultation.

\_\_\_ State Pre-K programs

### X Head Start programs

The Governor's Head Start-State Collaboration Office and Early Childhood and Assistance Program (ECEAP) have been working together with child care programs to maximize linkages between early childhood programs and child care. Intended results are the promotion of full-day services for children and high quality, comprehensive care.

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X Others (please identify) (658D(b)(1)(D), §98.12(a), 98.14(a)(1) & (2	((:
The Foundation for Early Learning, a private organization, gave \$150,000	//
Puget Sound Educational School District to provide technical assistance to	
help child care providers gain a level of quality and skills needed to become	e
subcontractors for full-day pre-K services.	

Programs that promote inclusion for children with disabilities

10 public and private organizations or funded projects, including the Division of Child Care and Early Learning have met twice to discuss common issues relative to their efforts to streamline eligibility and referral of children to appropriate early childhood programs.

### 2.2 - Public Hearing

Describe the Statewide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. At a minimum, the description must indicate:

•	Date(s) of statewide notice of public hearing
•	Manner of notifying the public about the statewide hearing
•	Date(s) of public hearing(s)
•	Hearing site(s)
•	How the content of the plan was made available to the public in advance of the public hearing(s) $(658D(b)(1)(C), \S98.14(c))$ :

### 2.3 - Public-Private Partnerships

• Describe the activities, including planned activities, to encourage public-private partnerships that promote private-sector involvement in meeting child care needs, including the results or expected results. (658D(b)(1), §98.16(d)):

Ongoing coordination around child care service delivery occurs as follows:

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(a) In 1988 the state Child Care Coordinating Committee (CCCC) was statutorily created in anticipation of federal child care regulation. This group is required to facilitate coordination and communication among state agencies involved in child care and early childhood services and makes recommendations regarding improvements to state services.

The CCCC consists of members from local government, resource and referral agencies, public schools, local health departments, early childhood education programs, child care providers, parents, private business representatives, advocacy groups, the Washington State legislature and state agencies. The CCCC is responsible for reviewing lead agency plans and making an annual report to the legislature. The full CCCC or its steering committee meets monthly; subcommittees are required. There are nine subcommittees including: Health and Safety, Subsidy, Career Development, Systems, Partnership, Public Policy, Inclusive Child Care, School-Age, and Licensing.

The CCCC serves in an advisory capacity to the lead agency and other administering agencies that provide services under the Child Care Development Fund.

- (b) Coordination is also maintained with other groups:
  - (1) Resource and Referral Agencies. This plan includes operating funds for resource and referral. Resource and referral agencies play an active role in coordinating and developing child care services at the local community level under contracts with the lead agency. (See Attachment 6, *Child Care Resource and Referral Network Roster*)
  - (2) Indian Tribes. A tribal representative participates on the Child Care Coordinating Committee. Ongoing coordination is also achieved through DSHS Indian Policy Specialists, DCCEL Tribal Liaison, and in cooperation with the Region HHS office. DCCEL is working with a tribal work group to facilitate coordination and problem solving related to tribal access to child care resources. Some of the on-going issues include: improving tribal members' access to child care subsidies, clarifying licensing and certification definitions and differences, helping tribes get to the level of recommended health and safety standards, and making training and technical assistance more readily available to tribes.
  - (3) DSHS Child Care Programs. DSHS administers child care subsidies for low income non-TANF families, child care related to protective services (CPS/CWS, alcohol, and substance abuse, therapeutic, and employed foster parents), and families being served through TANF programs, Seasonal and/or Teen Parent programs. DSHS administers child care licensing, as well as planning and development activities such as resource and referral and consumer education. Coordination among these programs is achieved through monthly meetings of

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the DSHS Internal Child Care Coordinating Committee (ICCCC). (See Attachment 7, ICCCC Roster)

- (4) Ad hoc committees. These committees are comprised of community representatives. These committees are comprised of community representatives and are convened as necessary to develop programs and program changes required to meet CCDF rules.
- (5) Washington Association for the Education of Young Children (WAEYC). WAEYC manages the training component of the Washington State Training And Registry System (Washington STARS). STARS is a statewide training initiative responsible for coordinating the required basic 20 hour training and the annual 10 hour training offered throughout the state in a variety of venues. This coordination includes designating training sites, selecting trainers, and approving processes for training,
- (6) ECEAP AND HEADSTART. ECEAP and Head Start closely coordinate policy development to ensure consistency for dually-funded Head Start and ECEAP providers and coordinate the allocation of early childhood funds. ECEAP and Head Start are represented on the CCCC. Also the CCCC and DCCEL are actively involved in the Governor's Head Start Collaboration Project.
- (7) The Governor's Head Start-State Collaboration Office (GHS-SCO), funded through a grant from the Head Start Bureau, serves as a single point of contact for both state agencies and local Head Start programs, informing all stakeholders of current services, policies and initiatives and to identify opportunities for improvements for services to low-income families and children. Additionally, the purpose of the GHS-SCO is to support the development of multi-agency and public/private partnerships at the State level to enhance the capacity of Head Start and other early childhood programs to improve outcomes and opportunities for children and families in Washington State by:
  - Helping to build early childhood systems and enhance access to comprehensive services and support for all low-income children;
  - Encouraging widespread collaboration between Head Start and other appropriate programs, services, and initiatives, augmenting Head start's capacity to be a partner in State initiatives on behalf of children and their families; and
  - Facilitating the involvement of Head Start in state policies, plans, processes and decisions affecting Head Start target population and other low-income families.
- (8) DCCEL has developed public-private partnerships with businesses and philanthropic organizations in the state to increase public awareness of the need for high-quality, affordable child care in Washington, to increase the number of

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employer-supported child care facilities in Washington, to address systemic issues that cut across services and to increase the availability of capital funds for child care facilities.

DCCEL was actively supportive of the Governor's Commission on Early Learning. This commission, comprised of business leaders, community organization representatives, parents and child care experts, developed a statewide public information campaign on the importance of the child's first three years of life and how parents and caregivers can help babies learn. This commission also assisted in the replication of the TEACH program in Washington and in the creation of The Foundation for Early Learning (this foundation is raising private funds to help support TEACH and to support parent education programs in Washington).

- DCCEL has contracted with the state's Department of Community Trade and Economic Development (DCTED) to manage a statewide Child Care Facility Fund that provides low interest loan and grants to employers and child care providers interested in developing a new child care business or expanding their existing business, This fund as resulted in the expansion of employer-supported child care facilities for their employees.
- DCCEL has also contracted with DCTED to manage a Child Care Micro Loan program. This program has given almost \$1,000,000 to five lending institutions throughout the state to provide small, below market rate loans to child care providers to help them start or expand their businesses. The local lenders have raised additional funds from local and national banks to support the Child Micro Loan program.

Outcomes of this coordination include program opportunities such as initiatives by State and Local Health Departments focused on consultation for providers, engagement of local providers in quality enhancement activities providing technical assistance, and resources and training. Additionally, outcomes include increase in the number of full-day/full-year Head Start and ECEAP programs, better linkage of school-age programs with the Department of Education initiatives like the 21<sup>st</sup> Century Learning Centers, joint conferencing linking family support and child care with business community, state-wide training for providers, parents, state agency employees, business groups, and increased knowledge in brain development through an initiative called BrainNet, and Washington STARS.

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# PART 3 -- CHILD CARE SERVICES OFFERED

# **Section 3.1 - Description of Child Care Services**

<u>REMINDER</u>: **The Lead Agency must offer certificates for services funded under 45 CFR 98.50**. (98.30) Certificates must permit parents to choose from a variety of child care categories, including center-based care, group home care, family child care and in-home care. (§98.30(e))

(\$70.30(€)	,	
3.1.1		dition to offering certificates, does the Lead Agency also have grants or eacts for child care slots?
	(X) ( )	No. Yes, and the following describes the types of child care services, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))
3.1.2		Lead Agency must allow for in-home care but may limit its use. Does the Agency limit the use of in-home care in any way?
	( ) (X )	No. Yes, and the limits and the reasons for those limits are ( $\S\S98.16(g)(2)$ , $98.30(e)(1)(iv)$ ):
	beca popu able	lead agency does not allow in-home care for Seasonal Child Care use this service is primarily for the migrant population. Most of this lation lives in sub-standard housing and the lead agency would not be to ensure the health and safety of the children. Seasonal Child Care is only program with this limitation.
3.1.3		all of the child care services described in 3.1.1 above (including certificates) ed throughout the State? (658E(a), §98.16(g)(3))
	( ) ( <b>X</b> )	Yes No, and the following are the localities (political subdivisions) and the services that are <u>not</u> offered:
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The Seasonal Child Care program is not offered in the northeastern corner of the state nor in western Washington, except for Skagit and Whatcom Counties.

#### **Section 3.2 - Payment Rates for the Provision of Child Care**

The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care. These rates are provided as <u>Attachment (27)</u>. The attached payment rates were phased-in over a period of six months January 1 - June 30, 2002.

The rates are the maximum amounts the state will pay for child care in each rate category. In the spring of 2000, DSHS contracted with the Social and Economic Services Research Center (SESRC) of Washington State University to conduct a survey of: 1) child care centers; and (2) licensed family child care homes. They attempted to call all 2,004 child care centers and a stratified random sample of about 19% of the 7,208 child care homes. Data were weighted based on the actual number of providers in each county.

Analysis of the market rate survey conducted by SESRC indicated a need to increase the maximum rates for subsidized child care. New rates were established in January 2002 and set at the "58<sup>th</sup> percentile", which means the rates are set so that 58% of child care slots statewide are available to subsidized families at the provider's usual rate. Most subsidy rates increased based on the 2000 market rate survey; those few that did not increase based on the market rate survey were maintained at the prior level

The following is a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

•	The month and year when the local market rate survey(s) was completed: <u>February</u> –
	May, 2000. (§98.43(b)(2)) A copy of the Market Rate Survey and the results of the
	survey are provided as Attachment

• How the payment rates are adequate to ensure equal access based on the results of the above noted local market rate survey (i.e., the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))

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Rates were set at the <u>58th</u> percentile of prices observed in the 2000 survey for each local market (DSHS Administrative Region). These rates were phased-in over a period of six months, January 1 - June 30, 2002.

• Additional facts that the Lead Agency relies on to determine that its payment rates ensure equal access include: (§98.43(d))

Washington State attempts to ensure equal access by making the same proportion of slots available to families regardless of where they live in the state and regardless of the type of care that they choose (center vs. family home).

The state analyzed the amount of the market that the new DSHS rates would buy for each county in Washington State. Counties were identified as needing special treatment if the new Regional rates would buy less than half of the full-time slots in the county for full-time infants, toddlers, and preschoolers. Four counties (Benton, Clark, Walla Walla, and Whitman) met the criterion. These counties were assigned to new "center" rates based on the DSHS Region they most closely resembled. The "family home" rates for these counties continued to be at the regional rate in which the county is physically located.

• If the payment rates do <u>not</u> reflect individual rates for the <u>full</u> range of providers -- center-based, group home, family and in-home care -- explain how the choice of the full range of providers is made available to parents.

The lead agency has no payment rates for "group homes" because this is not a licensed category in the state for child care. [Family homes with larger capacities are licensed in the family home category.] The lead agency sets maximum payment rates for licensed centers, family child care homes, care in the child's home and in the home of the relative provider.

Licensed/certified providers receive a \$250 infant bonus when they accept an infant (under 12 months old) in care. The provider must expect to care for the infant for five or more days and may only receive a bonus one time for that infant.

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## Section 3.3 - Eligibility Criteria for Child Care

By statute, all eligible children must be under the age of 13, or under age 19 if physically or mentally incapable of self-care, or under court supervision, and reside with a family whose income does not exceed 85% of the State Median Income (SMI) for a family of the same size and whose parent(s) are working or attending a job training or educational program or who receive or need to receive protective services. (658E(c)(3)(B), 658P(3), §98.20(a))

3.3.1 <u>Complete column (a) in the matrix below.</u> Complete Column (b) <u>ONLY IF</u> the Lead Agency is using income eligibility limits <u>lower</u> than 85% of the SMI).

#### **APPLICABLE**

IF

Family Size	(a) 85% of State Median Income (SMI) (\$/month)	Income Le than 85% used to limi	evel, lower of SMI, if
1	2,272	1,476	
2	2,971	1,990	
3	3,670	2.504	
4	4,369	3.016	
5	5,068	3,530	

The Lead Agency uses the State Median Income (SMI) of the year

Washington State calculates a state median income for each calendar year. The method uses the median income for a family of four for the federal fiscal year published by ACF. It them adjusts upward for inflation to compensate for the three month difference between fiscal and calendar years.

3.3.2 How does the Lead Agency define "income" for the purposes of eligibility? Is any income deducted or excluded from total family income, for instance, work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments? Is the income of all family members included, or is the income of certain family members living in the

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household excluded?	Please describe and/or include information as
Attachment	(§§98.16(g)(5), 98.20(b))

"Income" means any appreciable gain in real or personal property (cash or in-kind) received by a client during the month for which eligibility is determined, and that can be applied toward the needs of the assistance unit. (See attachment 10, definition of terms according to WAC 388-22-030.)

Working Connections Child Care counts the following as income when determining WCCC eligibility and copayment, as per WAC 388-290-0060:

- (1) A TANF grant, except when exempt under WAC 388-290-0070(9);
- (2) Child support payments;
- (3) Supplemental Security Income (SSI);
- (4) Other Social Security payments, such as SSA and SSDI;
- (5) Refugee assistance payments;
- (6) Payments from the Veterans' Administration, disability payments, or payments from labor and industries (L&I);
- (7) Unemployment compensation;
- (8) Other types of income not listed in WAC 388-290-0070;
- (9) Wages from employment or self-employment. "Self-employment income" means gross income from self-employment minus allowable business expenses in WAC <u>388-450-0085</u>; and
- (10) Lump sums as money you get from a one-time payment such as back child support, an inheritance, or gambling winnings.

The Co-pay Calculation Table effective April 1, 2003, is included as attachment 11.

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- 3.3.3 Has the Lead Agency established additional eligibility conditions or priority rules, for example, income limits that vary in different parts of the State, special eligibility for families receiving TANF, or eligibility that differs for families that include a child with special needs? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))
  - ( ) No
  - (X) Yes, and the additional eligibility criteria are: (<u>Terms must be defined in</u> Appendix 2)

According to WAC 388-290-0015 "family" in WCCC means one or more individuals who live together in the same household. The following describes how these individuals can be included in family size:

If the individuals living in the household are:	Then include the following members in WCCC family size:
Married parents	Both parents and all their minor
	children living in the household
Unmarried parents that have at	Both parents and all their minor
least one mutual child	children living in the household
Unmarried parents with no mutual	Each parent and his/her respective
children	child(ren) separate from the other
	parent and his/her child(ren)
Child(ren) related by blood,	Only the related children
marriage, or adoption who live with	
a WCCC consumer who is not	
legally and financially responsible	
for the child(ren)	
Child(ren) not related by blood,	Each unrelated child is considered a
marriage, or adoption who live with	separate family
a WCCC consumer who is not	
legally and financially responsible	
for the child(ren)	
A minor parent residing with	The minor parent and his/her child(ren)
his/her parent(s)	

In addition, the TANF grant is not counted for the first three months of employment to allow families time for successful transition to work employment.

The following income is exempted by the department when figuring income eligibility and co-payments, per WAC 388-290-0070:

- (1) The WCCC program does not count the following income types when figuring income eligibility and copayment:
  - (a) Income types as defined in WAC <u>388-450-0035</u>, <u>388-450-0040</u>, and

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### 388-450-0055;

- (b) Compensatory awards, such as an insurance settlement or courtordered payment for personal injury, damage, or loss of property;
- (c) Adoption support assistance and foster care payments;
- (d) Reimbursements, such as an income tax refund;
- (e) Diversion cash assistance and the early exit bonus;
- (f) Income in-kind, such as working for rent;
- (g) Military housing and food allowance;
- (h) The TANF grant for the first three consecutive calendar months after the start of a new job. The first calendar month is the month in which the job starts;
- (i) Payments to you by your employer for benefits such as medical plans;
- (j) Earned income of a WCCC family member defined under WAC <u>388-290-0015(2)</u>
- (2) WCCC deducts the amount paid for child support under court order, division of child support administrative order, or tribal government order, from other income types when figuring eligibility and co-pay for the WCCC program.

(See Attachment 9, WAC 388-450-0035 for educational benefits, WAC 388-450-0040 for Native American benefits and payments, WAC 388-450-0055 for assistance from other agencies and organizations, and WAC 388-290-0015 for what makes up a family in the WCCC program).

3.3.4	Has the Lead Agency elected to waive, on a case-by-case basis, the fee and income eligibility requirements for cases in which children receive, or need to receive, protective services, as defined in Appendix 2? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))
	( ) Not Applicable, CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.
	( ) No
	(X) Yes

3.3.5 Does the Lead Agency allow child care for children above age 13 but below age 19 who are physically and/or mentally incapable of self-care? (Physical and mental incapacity must then be defined in Appendix 2.) (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

( )	No	
(X)	Yes, and the upper age is	up to 19

Does the Lead Agency allow child care for children above age 13 but below age 19 who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii)

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(	)	No
(	,	INO

(X) Yes, and the upper age is <u>up to 19</u>.

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3.3.7	Does the State choose to provide CCDF-funded child care to children in foster care whose foster care parents are <u>not</u> working, or who are <u>not</u> in education/training activities? (§§98.20(a)(3)(ii), 98.16(f)(7))		
	( ) Yes. ( <b>NOTE</b> : This means that for CCDF purposes the State considers these children to be in protective services.)		

Note: The CWS Child Care Subsidy Program may be used to pay for the care of children in foster care when the foster parent is not working or in education/training if needed to maintain placement in the foster home.

- 3.3.8 Does the State choose to provide respite child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))
  - (X) Yes.( ) No.

**(X)** No.

### **Section 3.4 Priorities for Children**

3.4.1 The following describes the priorities for serving CCDF-eligible children including how statutorily required priority is given to children of families with very low family income and children with special needs: (Terms must be defined in Appendix 2) (658E(c)(3)(B))

Currently, there is not a waiting list for child care services in the State of Washington, although there is occasionally a waiting list for the Seasonal Child Care Program. When waiting lists are necessary, our contingency plan is to place children with special needs and children from very low income families on a priority waiting list. Families on the priority waiting list will be served before authorizations are made off the non-priority waiting list. Documentation for a special needs child is not necessary for placement on the priority list but is required to receive authorization for a child care subsidy.

If providing equal access is a concern, the state pays a higher rate to providers who care for children with special needs. To get a higher rate, the child's special needs must be documented and the child must require a higher level of care. (See Attachment 11, Include Me/Guide to Inclusive Child Care, DSHS publication 22-486(X)(2/01)). In addition, a Child Care Subsidies booklet for licensed and certified child care providers is available. (See Attachment 12, Child Care Subsidies/A booklet For Licensed and Certified Providers).

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DCCEL is exploring with CA options to enhance the quality and capacity of child care for CPS/CWS clients and children in foster care, by developing a special model program to serve this population.

The following describes how CCDF funds will be used to meet the needs of families who are receiving Temporary Assistance for Needy Families (TANF), families who are attempting through work activities to transition off of TANF, and families that are at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

Under Washington State's welfare reform, "Workfirst" legislation, an integrated child care subsidy program, Working Connections Child Care, went into effect July 1997. Child care services are administered by the Washington State Department of Social and Health Services, Economic Services Administration, Division of Child Care and Early Learning.

All income-eligible families (gross income minus child support paid out and if at or below 200% of the federal poverty level adjusted for family size) who are participating with children under 13 or under 19 if a special needs child, regardless of their source of income, (whether TANF, employment, or a combination) are eligible for subsidized child care services with a copayment. Preference is no longer given to families due to TANF status. Rather, the goal is to support employment for all eligible low-income families. These services are delivered through the individual welfare office, or Community Services Offices (CSO'S). Some communities provide services to families via call centers. The monthly co-payment is made by the parent directly to the provider.

CPS and CWS, and Employed Foster Parent Child Care are served through DSHS, Children's Administration.

At least 70% of CCDF funds are spent on child care subsidies in this population.

TANF families who are awaiting approval of TANF eligibility who are ready for immediate job search, may be authorized child care benefits while their application is pending. These families complete a child care application and have the qualified provider of their choice complete the provider information form. Child care is authorized if the TANF application is approved. If found to be ineligible for TANF, child care benefits stop.

Families receiving Food Stamp benefits who are required to participate in Food Stamp Employment and Training activities (FS E&T), are eligible for child care for work activities if they complete the WCCC application and meet the FS E&T Program requirements.

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3.4.3	The following describes how the Lead Agency addresses situations in which
	funding is not sufficient to serve all families that are technically eligible under
	State policies:

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# **Section 3.5 - Sliding Fee Scale for Child Care Services**

3.5.1	A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on <u>income and the size of the family</u> . A copy of this sliding fee scale for child care services and an explanation of how it work is provided as Attachment		
	Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))		
	<ul> <li>() No.</li> <li>(X) Yes, and the following <u>describes</u> any additional factors that will be used to determine a family's contribution including, but not limited to, a maximum amount (family cap), number of children in care, cost of care, and/or whether care is full or part-time:</li> </ul>		
	With the Employed Foster Parent Child Care Program, the state does not ask for a co-payment as the care is based on protective services. For the CPS and CWS Child Care Subsidy Programs, co-payments may be waived on a case by case basis.		
3.5.2	Is the same sliding fee scale provided in the attachment in response to question $3.5.1$ above in use in <u>all</u> parts of the State? $(658E(c)(3)(B))$		
	<ul><li>(X) Yes</li><li>( ) No, and other scale(s) are provided as Attachment</li></ul>		
3.5.3	The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: \$\frac{1,222.}{}\$ (See attachment 13, Federal Poverty Level Chart 2003)		
	The Lead Agency must elect ONE of these options:		
	<ul> <li>() ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.</li> <li>() ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.</li> <li>(X) SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. A description of these families is:</li> </ul>		

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Foster parents may receive child care subsidies for their foster children with no co-payment. Co-payments may be waived on a case-by-case basis for CPS and CWS child care.

- Does the Lead Agency have a policy that prohibits child care providers from charging families any unsubsidized portion of the providers' normal fees (in addition to the contributions discussed in 3.5.1)? (§98.43(b)(3))
  - ( ) No
  - (X) Yes, please describe:

Child Care providers who accept children who receive child care subsidies are prohibited from charging families the difference between the subsidy rate and the provider's rates for the normal daily child care. Providers may charge subsidized parents for additional services such as: care for non-approved activities (shopping, movies, etc...), optional enrichment programs, optional lunch program, if the child is picked up after operating hours, or the parent pays the copayment late.

The following is an explanation of how the copayments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

In December 1997, the Washington State Institute for Public Policy of the Evergreen State College, published a report entitled Child Care Co-payment Affordability Study: Are Washington State's Child Care Co-payments Reasonable and Affordable? The purpose of the report was to assess whether the co-payment structure of the Working Connections Child Care Program was affordable for families.

Three affordability guidelines were developed specifically for this report, taking into account the following factors: 1) Consideration of the limited resources available to families; 2) Data on typical child care expenditures; and 3) The lead agency's policy goal of helping families benefit from employment. These three guidelines were considered in determining if copayments were affordable:

• Does the co-payment schedule take into account that below a minimum income co-payments may compete with expenditures on basic necessities such as shelter, utilities, and transportation?

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- Is the maximum co-payment (representative of what families with similar incomes spend on child care) at or below 12 percent of family income?
- When a family's earned income increases, does the co-payment schedule avoid reductions in the family's total resources?

When Washington's co-payment schedule was then compared with the copayment schedules of 28 other states, the findings were:

- The beginning and ending points of Washington's schedule are similar to most of the other states surveyed; and
- Washington State families with gross incomes between 100 and 145% of the federal poverty level pay lower co-payments than would similar families in most of the other states surveyed.

When measured against these affordability guidelines of other states, Washington's co-payment schedule is reasonable and affordable for families.

#### **Section 3.6 - Certificate Payment System**

A child care certificate means a certificate, check, or other disbursement that is issued by the Lead Agency directly to a parent who may use it only to pay for child care services from a variety of providers (including center-based, group home, family and in-home child care), or, if required, as a deposit for services. (658E(c)(2)(A)), 658P(2), §§98.2, 98.16(k), 98.30(c)(3) & (e)(1))

Describe the overall child care certificate payment process, including, at a minimum:

3.6.1 A description of the form of the certificate:  $(\S98.16(k))$ 

As part of the award letter given to the parent after determining eligibility, documents (WCCC Award/Change Letter and Working Connection Child Care Information You Need To Know DSHS 07-066(REV. 05/2000) and In-Home Relative Provider Letter, DSHS 07-075 (REV. 05/2000) are generated indicating the maximum amount of child care for which the family is eligible, the dates of that eligibility, and the activity the child care is supporting. In addition, the parents and the provider complete a provider information form that collects the pertinent information needed to make payment to the provider. (See attachment 25, WCCC Award/Change Letter and Working Connections Child Care Information You Need To Know and attachment 26, In Home Relative Provider Letter).

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A description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to the choice of provider: (658E(c)(2)(A)(iii), 658P(2), §§98.2, 98.30(c)(4) & (e)(1) & (2))

Parents may choose from all licensed or certified child care facilities (including centers and homes) or a relative/in-home care provider who meets the program's guidelines. Under CCDF, child care information is provided to families in the form of a pamphlet, (Child Care Options In Washington State, DSHS 22-859x). Parents who need help in selecting a child care provider, are referred to the local Child Care Resource and Referral agency. (See Attachment 14, Child Care Options in Washington State)

Note: If a parent chooses to use child care subsidies in a bordering state, the child care facility must meet that bordering state's licensing or certification rules.

When a child who is in care or custody of Washington State qualifies for Children's Administration child care subsidy programs and needs child care in another state, Washington will authorize care consistent with the state's CCDF child care subsidy policies and the Interstate Compact Agreement for Child Welfare Agencies.

When a child qualifies for Working Connections Child Care (WCCC) Program and needs child care in another state, WCCC will authorize care to a provider who meets that other state's licensing regulations. WCCC will pay the lead agency's maximum child care subsidy rate based on the child's age and region where they live or the provider's rate, whichever is less.

3.6.2 If the Lead Agency is also providing child care services through grants and contracts, explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (§98.30(a) & (b))

Parents are notified of their choice to access ECEAP services if they are income eligible. Parents who access ECEAP services will be referred to the local DSHS office and resource and referral organization if they are in need of additional child care.

Parents who meet income and program guidelines for the Seasonal Child Care Program are given information about the types of licensed child care available to them. The local resource and referral agency may be contacted

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for child care referrals that meet the families needs. The parents make the selection. The Seasonal Child Care Program is offered in Yakima, Kittitas, Benton, Franklin, Walla Walla, Adams, Grant, Douglas, Chelan, Skagit, and Whatcom Counties. The amount of child care services provided are limited to \$8,448,103.00 per year.

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#### **PART 4 - PROCESSES WITH PARENTS**

- The following describes the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a) through (e)). If the process varies for families based on eligibility category, for instance, TANF versus non-TANF, please describe. The description should include:
  - How parents are informed of the availability of child care services and about child care options;
  - Where/how applications are made;
  - Who makes the eligibility determination;
  - How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4; and
  - Length of eligibility period including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs.
  - Any steps the State has taken to reduce barriers to initial and continuing eligibility for child care subsidies.
  - Parents receive information about the WCCC program (and other child care subsidies available through a continuum of services) through their local DSHS office, resource and referral agency, child care provider, Seasonal Child Care contractors, or other community agencies. Posters and brochures are available in six languages publicizing the availability of these services. Parents are informed of their options through DSHS workers (during WorkFirst Orientation, by Employment Security workers when entering WorkFirst Job Search), resource and referral agencies, brochures and child care providers (including ECEAP, HeadStart and Seasonal). (See attachment 15, DSHS publication Seasonal Agricultural Workers! Do you work in fields, orchards or packing sheds?) (DSHS 22-330)(X) Rev. (5/00) and attachment 16, DSHS publication Homeless) (DSHS 22-194)(X) 6/96.
  - With the exception of Seasonal Child Care (where contractors conduct eligibility functions), eligibility determinations are made at the local DSHS office. A voucher system is used in which parents apply for services and tell the authorizing worker the name of the provider of choice. An award letter stating the amount of care, dates of eligibility, amount of co-payment, and activity covered by child care is sent to the parents. Upon entering the authorization into the payment system, the provider (or parent in the case of in-home care) receives an invoice at the end of each month for verification of services and signature. This is returned to DSHS triggering issuance of a check by the 10<sup>th</sup> of the month.

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- Parents are notified of their opportunity to access ECEAP services if they are income eligible. Parents who choose to apply for ECEAP services are referred to the local DSHS office and resource and referral organization when they are in need of full-day child care.
  - WCCC eligibility requirements and rules take precedence when a family has a child enrolled in a "blended HeadStart/ECEAP site" (one that is also a licensed child care center or home). The family must meet WCCC income guidelines and the provider must be licensed or certified. The amount of care authorized is based on the parent and child's schedule (no longer than six months). The families on-going eligibility is based on WCCC criteria. All WCCC children are authorized a full-day of care when the need is for five(5) hours or more a day or one hundred ten (110) hours or more a month. Again, the family is primarily subject to WCCC eligibility requirements and rules.
- Potentially eligible families requesting child care benefits are screened at their initial eligibility interview for issues that prevent them from participating in WorkFirst. Child care is one of the issues screened for. Clients are also given a Working Connections Child Care (WCCC) or other DSHS child care program application, or an application is taken over the phone, and referred to the appropriate agency staff. As part of the application, the provider information form is taken to the provider of choice by the parent, and completed by the provider indicating the provider's availability and cost of care. Based on the completed application and verified income, CSO staff, Children's Administration staff, or contractor (in the case of Seasonal Child Care) determine eligibility and calculate the family's copayment as it applies. The award letter is generated to the parent stating the eligibility period, the amount of the monthly co-payment, and the activity covered by the child care. The parent may take this form to the provider of choice as an assurance of the family's eligibility. The computerized letter generated by the DSHS voucher payment system serves as written authorization to the provider, as well as written verification to the client. Authorizations are for a maximum of six months. All families will have copayments reviewed periodically in accordance with the Department's written requirements with the exception of Employed Foster Parent Child Care Program.
- The Community Services Division currently has call centers in all six regions, either centralized or virtual. Customers can call and receive some or all of the following services; learn about all CSD services, get child care services, medical assistance, and report changes for all programs. By November 2003, customers will be able to access all these services by simply calling The Answer Phone. The caller will be directed to the appropriate call center.

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- The e-Child Care project is a multi-year project working to leverage today's advanced technologies to simplify processes like enrollment, attendance tracking, and payment processing for the child care subsidy program. The project supports DSHS' ability to subsidize and ensure quality child care services by applying automation that impacts three business processes:
  - Public Access Through an interactive Internet component, parents will be able to apply for child care subsidies and providers will be able to verify the application or payment status of children in their care.
  - Case Management This component will streamline according to the needs of child care authorizing workers, interfacing vital data to compliment case tracking and audits.
  - Payment Process Attendance-tracking and payment components will help child care providers track, report children's attendance, and bill accordingly using an automated approach.
- 4.2 The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding such parental complaints available to the public on request. (658E(c)(2)(C), §98.32))

DSHS maintains a record of complaints (from parents and others) in the Case and Management Information System (CAMIS), Children's Administration (CA) automation system. Complaints are received, categorized, and forwarded for investigation to licensor or CPS investigators as appropriate by CA Intake staff. The outcome of licensing and/or CPS investigations is entered into CAMIS, whether "founded", "unfounded" or "inconclusive" (CPS allegations) or "valid", "invalid", or "inconclusive" (licensing allegations). Complaint outcome information is available to parents and the public on request by telephoning the facility licensor. Parents and the public can also request public disclosure of licensing files to obtain written information. This includes information about complaint receipt and outcomes.

A child care complaint brochure (Child Care Complaint Process-What Happens when there is a complaint about a Child Care Home or Center? DSHS 22-159(X)) is available explaining what happens when complaints about child care are registered with the Children's Administration Intake office and how decisions are made to determine if the complaint is investigated by CPS or DCCL. Procedures for investigations are explained along with follow up procedures after investigation is completed. (See Attachment 17, DSHS publication Child Care Complaint Process-What happens when there is a complaint about a Child Care Home or Center? DSHS 22-159(X)(6/98))

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The Licensed Child Care Information line (1-866-48-CHECK) is available for parents who want to gain information about the licensed status of their child care provider. Basic information is provided about capacity, ages of children served, and the length of time a provider has been licensed. Parents can also obtain information on whether a home or center has been revoked or suspended or is in summary suspension, as well as if the home or center has any <u>founded</u> Children's Protective Services complaints.

4.3 The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31))

Written in the Washington State Code (WAC 388-150-170(2)(e), 388-155-170(2)(e) is the following directive to each child day care center and family home licensee:

"The licensee shall give the parent the following written policy and procedure information: Permission for free access by the child's parent to all center (home) areas used by the child."

This information is found in the booklets (Minimum Licensing Requirements for Child Day Care Centers, Minimum Licensing Requirements for Family Child Day Care Homes and Minimum Licensing Requirements for Child Day Care Centers Caring Exclusively for School-Age Children) that are given to child care providers.

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care:

NOTE: The TANF agency, not the Child Care Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record. The TANF agency that established these criteria or definitions is: **Washington State Department of Social and Health Services.** 

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- "appropriate child care": means licensed, certified or approved under state laws and regulations that apply to the type of child care you use, and that you may make your own choice among child care options that are available in your area.
- "reasonable distance": means that you can reach the child care site without travel that exceeds normal expectations in your community.
- "unsuitability of informal child care": By implication, anything that is not allowable as a reimbursable child care option as defined in WAC 388-290-0125 would constitute unsuitable informal child care and could not be reimbursed with CCDF funding.
- "affordable child care arrangements": means at or below your share of the child care costs ("co-payment") calculated by the Working Connections Child Care Program.

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### PART 5 - ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE

### 5.1 - Quality Earmarks and Set-Asides

5.1.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities. The following describes the activities; identifies the entities providing the activities; and describes the expected results of the activities.

Infants and toddlers:

Washington State has focused on recent research on infant and child brain development to advance thinking and promote knowledge of the importance of early learning. A public-private collaboration has developed a statewide system through Healthy Child Care WAshington to improve health and safety standards through consultation, training and technical assistance, and by building capacity and quality enhancement projects. This collaborative effort has involved representatives from multiple state agencies and numerous educational, health and community organizations. Initially it was a statewide effort to provide public health consultation, mini-grants to child care providers for quality enhancement through R&R, and brain development training for parents, caregivers, and all persons and systems that come into contact with pregnant women and children. The project has provided training on early brain development research, built capacity and quality enhancements for infant and toddler care, and created an infant nurse consultation system.

The following four areas of activity seek to improve the quality of care for infants/toddler:

- 1. <u>Capacity and Quality Enhancement:</u> Funding from the quality earmark has been used to expand Child Care Resource and Referral services so that they are available statewide, as well as to provide increased hours of operation in rural areas of Washington State.
- 2. <u>Local Public Health Child Care Health Consultation</u>: Funding awarded to the state Department of Health, has provided funding to all local health jurisdictions within the state. This funding was phased in with 10 initial pilot sites and expanded to 34 local health jurisdictions by 12/30/00. CCDF funds will be used during the period of this state plan to continue funding local health jurisdictions to provide consultation through systems development within communities to child care centers and homes.
  - 3. The State Department of Health through Healthy Child Care Washington is providing consultation, evaluation, and technical support to the local health jurisdictions. The Department of Health also developed an

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Infant/Toddler Nurse Consultation Handbook, *Public Health Consultation* In Child Care . (See Attachment 18, *Public Health Consultation in Child Care*).

In addition, through Healthy Child Care Washington, the State Department of Health invests CCDF Quality dollars to foster the link between child care and health systems statewide and to develop innovative strategies for addressing growing health and safety concerns (social/emotional, physical, cognitive and mental health) in child care environments through a partnership between local R&Rs and local public health consultants.

The Department of Health is developing an evaluation process collaboratively designed by DOH, LHJ representatives, and an evaluation consultant that includes information identified in the year end report and will be consistent with the National Evaluation of Community Integrated Service Systems (CISS) Development in Child Care Grants. This evaluation moves from measuring capacity to measuring outcomes at four levels: systems, child care health consultants, child care providers and parents.

#### 4. Brain Research, Training and Awareness:

Information about early brain development research and its implications continues to be dispersed through groups of trainers ("Brain Squads"), who provide information, training and presentations to their local communities. The lead agency continues to make information available through the BrainNet web-site (www.BrainNet.wa.gov), and through the BrainNet Parent/Caregiver brochure entitled <u>Babies are born learning....</u> <u>Make every moment count</u> which is available in eight languages.

Resource and referral services:

Child care resource and referral services were mandated by Washington State law in 1993 under RCW 74.13.0903. Child care resource and referral agencies are responsible for needs assessments, resource development, provider training, technical assistance, and parents training and outreach. In addition, this law mandated the creation of a statewide network, to improve the quantity and quality of child care available in Washington State by fostering statewide strategies, generating, and nurturing effective public-private partnerships. The statewide network also provides important training; creates standards of service, and provides general technical assistance to its 18 locally based child care resource and referral programs.

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During calendar year 2002, the R&R agencies across the state responded to 26,638 calls from parents seeking care, providers seeking technical assistance and community and business leaders seeking resources. In 2002, the local R&Rs trained 10,944 child care providers through 3,000 hours of training.

School-age child care:

The Division of Child Care and Early Learning contracts with the School's Out Washington to improve the quality and expand capacity to serve school-age children and youth in Washington State (WRAP). Working in collaboration with the Washington School-Age Care Alliance, Seattle MOST Project and the School-Age Care Subcommittee of the Washington State Child Care Coordinating Committee, School's Out Consortium leverages public dollars with grants from private foundations to perform the following services:

- Provide training and technical assistance to school-age programs via telephone, site visits, a quarterly newsletter and resource library;
- Sponsor and plan an annual statewide school-age conference;
- Educate and engage communities through participation in local, regional and statewide groups; and
- Provide funding to local out-of-school time programs to meet or maintain licensing requirements.

During the year 2000, School's Out Washington published the first status report on out-of-school time care in Washington State. The report titled Out of School Time Care In Washington 2000 identifies the barriers families and communities face in trying to ensure that school-age children and youth are engaged in safe, enriching activities. The report also focuses on what young people between the ages of 5 and 14 years are doing during the times they are not in school. (See Attachment 20, 2000 Annual Report – Out-of-School Time Care in Washington State 2000 Summary Report/Linking Up With Partners In Caring).

5.1.2	(658E(c)(3)(B), 658G, §§98.13(a),	98.16(h), 98.51, 98.16(h)). The Lead Agency and percentage will be used for the quality funds):
	\$(	%)

5.1.3 Check either "Yes" or "No" for each activity listed to indicate the activities the Lead Agency will undertake to improve the availability and quality of child care (include

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activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658E(c)(3)(B), §§98.13(a), 98.16(h))

	Yes No	
	X	Comprehensive consumer education;
		Grants or loans to providers to assist in meeting State and local
		standards;
_	_X	Improving the monitoring of compliance with licensing and regulatory
		requirements;
	X	Professional development, including training, education, and technical
		assistance;
	X	Improving salaries and other compensation for child care providers;
		Activities in support of early language, literacy, and numeracy
		development;
	X	Activities to promote inclusive child care;
-		Healthy Child Care America and other health activities including
-		those designed to promote the social and emotional development of
		children;
	X	Other quality activities that increase parental choice, and improve the
-		quality and availability of child care. (§98.51(a)(1) and (2))
		quanty and availability of clind care. (§ 96.51(a)(1) and (2))

5.1.4 Describe each activity that is checked "Yes" above, identify the entity(ies) providing the activity, and describe the expected results of the activity.

The State is using a four point strategy to improve child care in Washington: quality, availability, accessibility, and early learning. The four strategies are focused on:

CAPACITY AND INFRASTRUCTURE FOR QUALITY SERVICES ensuring availability of suitable physical spaces, infrastructure to support diversity of settings, resource and referral coverage for access and consumer education, links to transportation, and licensing.

WORKFORCE DEVELOPMENT AND RETENTION ensuring caregiver training, compensation and career mobility; and

FINANCING AND AFFORDABILITY ensuring sufficient funding (public and private) to support quality programs and parent choice, affordable co-pay levels, and higher income eligibility limits for low income parents.

#### **COMPREHENSIVE CONSUMER EDUCATION:**

• Choosing Child Care is a Consumer Guide for Parents developed by the Washington State Department of Social and Health Services. This booklet aims to help parents become better consumers with a detailed explanation of the choices available, guidance to staffing, help with child care costs, and a checklist for making wise child care choices. Additionally, funds are provided to child care resource and referral state agencies for consumer education activities when families call to locate

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child care. Consumer education is one element that is included in all capacity and infrastructure initiatives. (See Attachment 21, Choosing Child Care: A Consumer Guide for Parents)(DSHS 22-516(X)(Rev. 10/98).

- The Licensed Child Care Information System is maintained by the lead agency, DCCEL. This system includes a toll-free phone line (1-866-48-CHECK) and an interactive web page (www.dshs.wa.gov/childcareinfo) for parents to access information about their child care home or center. The "manned" toll-free number creates a simple process for parents by allowing them to call one central, statewide number. They can learn general information such as:
  - If their child care provider is licensed;
  - If any valid licensing complaints and founded CPS complaints have been made to the department by other parents; and
  - Basic information about capacity, ages of children served, and the length of time a provider has been licensed.

A parent who uses the toll-free number to seek a new child care provider is transferred to the Washington State Child Care Resource and Referral Network. If the parent wishes to report a licensing violation, the call is transferred to an intake worker. If the parent wishes to obtain more specific information regarding their child care provider, the call is transferred to the appropriate licensor.

- The Child Care Resource and Referral statewide system offers consumer education around choosing quality child care. Parents and other interested parties access information from the local R&Rs in person, over the phone, by mail and via the internet. In addition, the WA State Child Care Resource & Referral Network hosts a toll-free number consumer education hotline and an award winning web site (www.childcarenet.org) which offers access to a wealth of information to parents, child care providers, employers and other interested parties 24 hours a day.
  - Parents can get the contact information of their local child care resource & referral. R&R also provides, information on how to choose a child care provider, where to access financial assistance, licensing information, how to register complaints, in-home child care, background checks of prospective providers, how to become a child care provider and other parenting resources.
  - Child Care Providers can find out information on the TEACH Program and other child care provider scholarships available, how to gain access to loans and grants to improve their child care facility, links to state subsidy programs, answers to business planning, a home business manual, center business manual, facility planning manual and other provider resources.
  - Employers: A site is specifically geared to help the small or large company integrate Work/Life options in their companies by explaining why work/family practices would benefit their company, what it takes to make a work/life program successful, a business self-assessment tool to determine the benefit

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resources of the company, an employee assessment tool to garner the needs of the employees, a cost benefit analysis to show an employer how much is being lost by not having work/family programs, a comprehensive list of types of programs that can be offered in all businesses, and ideas specifically tailored for small businesses.

- Child Care Supply and Demand Data is offered on a statewide and county level. Annual and quarterly reports detail the child care referral statistics that the Network has compiled from local R&R agencies. Information includes trends in age groups referred and other data relevant to the child care system in Washington State.
- The Links page offers many hyperlinks to a wide range of organizations and programs that are leaders in child/youth care and human services.
- <u>DCCEL's website</u> www.dshs.wa.gov/esa/dccel provides information relating to child care homes and centers, statewide child care programs, available publications, resources, and contract opportunities.
- <u>Tribal State Child Care Work Group</u> consists of tribal child care directors and Region X and DCCEL tribal liaisons. This group meets to share information, learn about new programs, identify problem issues, prioritize group needs and develop an annual plan.

## GRANTS OR LOANS TO PROVIDERS TO ASSIST IN MEETING STATE AND LOCAL STANDARDS:

- The lead agency made funds available to local communities throughout the state to improve the quality of child care services, expand child care services to Washington families and communities with unmet child care needs, and to expand child care options for low income families. These included funding both child care provider recruitment and child care provider retention services by providing licensing assistance, mentoring, technical assistance, consultation, equipment needs assessment and purchase, a substitute child care provider bank and other specialized models. Through the child care resource and referral system, child care providers across the state had access to mini-grants to purchase materials recommended by DCCEL licensors to assist them in meeting minimum licensing requirements and improving the quality of care.
- CCDF funds are used to support the Child Care Advantages program in the Department of Community, Trade and Economic Development (DCTED). DCTED funds provide technical assistance grants and low interest loan assistance to businesses to develop child care facilities for their employees' children, particularly children of low-income workers.

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- DCTED administers the Child Care Facility Fund, which provides low-interest loans, and small grants to build or expand employer-supported child care facilities.
- DCTED also administers a Child Care Micro Loan Program (with state TANF-reinvestment funds) to increase access to capital for child care businesses across the state. Since its inception, the micro-loan program has given loans to 34 child care businesses, creating 52 new jobs and helping to retain another 46 jobs. These loans also created 383 new child care slots and improved the quality of care (reported through May 2001). The child care micro loan program has created five new revolving loan funds in communities throughout the state which will be self-sustaining after 2002.

## IMPROVING THE MONITORING OF COMPLIANCE WITH LICENSING AND REGULATORY REQUIREMENTS:

- Washington State requires full licensing of child care centers and homes including on-site inspections. Every three years, each center or home has to renew its license. If there is a complaint, each complaint is investigated with unannounced site visits. Corrective action includes a statement of deficiencies and plan of correction, probationary licenses, and civil penalties, as well as license revocation, suspension, and denial. Licensors make frequent monitoring visits to facilities with either an initial or probationary license. Child care centers receive unannounced annual monitoring visits and family child care homes receive an unannounced interim monitoring visit within the three year licensing cycle.
- CCDF funds are used for State Fire Marshal fire safety inspections in child care centers.
- Washington State is developing a Licensor Training and Mentoring Program with
  the goal to increase consistency in licensing practice, regulation enforcement and
  interpretation of licensing requirements. DCCEL recently formed a Staff
  Development Team which created Individual Staff Development Assessment and
  Plans and has identified Competencies and Skills for the following positions:
  Licensing Supervisor, Child Care Center Licensor, Health Specialist, Family Child
  Care Licensor and Clerical Support Staff.

The first project focuses on licensor training, based on identified competencies and skills. The Staff Development Team identified the skills for "Core Licensor Training" as those needed within the first six months of employment and developed Core Licensor Training and Mentoring Modules: Job Basics, Licensing Tools, Computer Skills, Licensing Process, Complaint Process, Evaluating/Assessing Child Care Programs and Environments, Ethics, Provider Orientation. As a result of the Licensing Practice Improvement Project, and feedback from licensors and their supervisors, the first training module to be developed is for the Complaint Process. Content and curriculum is being developed for "How to Conduct an Investigation",

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"Interviewing" and "CAMIS Complaint Module". It is expected that all licensing staff will complete this module by July 2003.

DCCEL plans to establish three Training Coordinator positions (one per Region), offer a one day training session at DCCEL's conference in October 2003, and further develop and present curriculum for the major components of the Licensor Training Program in the coming year.

## PROFESSIONAL DEVELOPMENT, INCLUDING TRAINING, EDUCATION AND TECHNICAL ASSISTANCE:

• DCCEL maintains the Washington State Training and Registry System (STARS). The STARS program improves child care through basic and on-going training for child care providers. Family child care licensees, child care center and school-age directors, program supervisors and lead staff are required to complete 20-hour Basic STARS training within the first six months of licensure or employment date, or meet the educational exemption. Experienced providers may apply for a waiver, based on specific criteria. (See Attachment 22, Washington State Training and Registry System/Washington Stars)

Each year thereafter, mandatory participants must complete ten clock hours or one college credit of approved training. For directors and program supervisors, five of the ten hours must be in program management or administration. Scholarships are available for both the Basic and continuing training requirement. Provider training records, trainer profiles and training information are recorded in the STARS registry (a web based database that can be accessed by providers, trainers, licensor and the general public).

DSHS contracts with WAEYC to administer trainer and training approval, scholarship disbursement, general coordination publicity, and collection of provider information for the STARS Registry.

## IMPROVING SALARIES AND OTHER COMPENSATION FOR CHILD CARE PROVIDERS:

• The lead agency is a partner in the public/private funding of TEACH Early Childhood® Washington which is administered by the WA State Child Care Resource & Referral Network.

## ACTIVITIES IN SUPPORT OF EARLY LANGUAGE, LITERACY, AND NUMERACY DEVELOPMENT: Needs Text

### **ACTIVITIES TO PROMOTE INCLUSIVE CHILD CARE:**

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- The state pays a higher child care subsidy rate to providers who care for children with special needs.
- The Child Care Coordinating Committee, Inclusive Child Care Subcommittee provides a forum for exchanging information, discussing inclusive child care policy issues, and developing implementation strategies. Please see the attached, "Include Me Inclusive Child Care Subcommittee Vision and Action plan 2001-2005" [draft 8/9/02]
- The Include Me/Guide to Inclusive Child Care, DSHS publication 22-486(X)(201) [also attached] was a coordinated effort of DCCEL, Child Care Coordinating Subcommittee on Inclusive Child Care and other entities to provide information to child care providers about caring for children with special needs and available resources. The booklet is maintained and reprinted by DSHS with CCDF funds..

# HEATLHY CHILD CARE AMERICA AND OTHER HEALTH ACTIVITIES, INCLUDING THOSE DESIGNED TO PROMOTE THE SOCIAL AND EMOTIONAL DEVELOPMENT OF CHILDREN:

• Funds were awarded Healthy Child Care Washington State to promote, model and provide training and technical assistance for community level consultation through local health jurisdictions to child care and youth care providers;

## OTHER QUALITY ACTIVITIES THAT INCREASE PARENTAL CHOICE, AND IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE:

• Child Care Capacity & Access: In October 2001, child care recruitment & retention program funding was awarded to 5 public and private agencies around the state to expand and retain access to quality child care. The funds are used specifically to create more licensed child care and to provide child care providers with quality and business training, minor equipment & repair grants, and fully trained substitute child care (substitute banks).

5.1.5 Is any entity identified in sections 5.1.1 or 5.1.4 a non-governmental entity	?
<ul><li>( ) No.</li><li>(X) Yes, the following entities named in this part are non-governmentation.</li></ul>	al:
Name: Type: (government/private non-profit/private for-profit)	

• Washington State Child Care Resource and Referral Network, private non-profit

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- School's Out Washington, private non-profit
- Economic Opportunities Institute
- Eastern Washington University, government
- Metropolitan Development Council, private non-profit

### 5.2 - Good Start, Grow Smart Planning and Development

This section of the Plan relates to the President's *Good Start, Grow Smart* initiative which is envisioned as a Federal-State partnership that creates linkages between CCDF, including funds set-aside for quality, and State public and private efforts to promote early learning. In this section, Lead Agencies are asked to assess their progress toward developing voluntary guidelines on language, literacy, pre-reading, and numeracy, a plan for the education and training of child care providers, and a plan for coordination across at least four early childhood programs and funding streams.

### 5.2.1 - Voluntary Guidelines for Early Learning

_	Indicate which of the following best describes the current <b>status</b> of the State's efforts to
•	$\boldsymbol{c}$
	develop research-based early learning guidelines (content standards) regarding language,
	literacy, pre-reading, and numeracy for three to five year-olds:

a)	_ Freminiary unliking or planning.
b)	Guidelines are being developed.
c)_X_	Guidelines are developed but need to be modified.
d)	Guidelines are developed and implementation is in progress.
e)	Guidelines are developed and implemented in pre-kindergarten programs but
	not in child care.
f)	Guidelines are developed and implemented.
g)	Other. Please describe:

• Describe the **process** that was used or is planned for developing the State's early learning guidelines. Indicate who or what entity provided (or is providing leadership) to the process as well as the stakeholders involved. Was (or is) the process framed by State legislation, research and/or guiding principles? If so, please describe. How are (or will) the early learning guidelines and the State's K-12 educational standards aligned? If they are not aligned, what steps will be taken to align them? If the early learning guidelines are in development, what is the expected date of completion?

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In June 2000, the Office of Superintendent of Public Instruction (OSPI), in partnership with an Early Childhood Literacy Task Force, developed the Framework for Achieving the Essential Academic Leaning Requirements in Reading Writing Communication—Birth to 5 Years. The task force membership consisted of a broad base of early childhood stakeholders across the spectrum of birth to 5 years and Grades K-3.

This document was designed to assist early care and education providers in planning and implementing early learning opportunities that will help prepare young children for later success in meeting the essential academic learning requirements in reading, writing, and communication.

These learning frameworks were not intended for use as a group or individual screening tool to place children in programs or to make determinations of readiness for school. They were not intended to be used as an assessment checklist nor as an evaluation tool to make high-stakes decisions about children's program placements.

The frameworks were intended to guide providers/teachers as they develop curriculum and activities for the children in their care.

### Assumptions/Guiding Principles reflected in this document:

- Literacy begins at birth;
- Children progress at different rates and individual children may show more or less progress at certain times;
- Learning is dependent on one skill being the basis for another skill or a number of skills at the next level;
- Careful observation of young children is critical to determine whether or not a child has a particular skill. Very young children perform skills within the context of daily events or activities which must be carefully observed for the purposes of assessment;
- Literacy is a critical tool used for thought and communication and the transmission of lanuage and culture across generations.

In June 2000, this document was created in alignment with Washington State's K-3 educational standards. However, the K-3 educational standards are currently under revision

In December 2002, Governor Locke requested money (in FY 03-04 budget) for the development of Kindergarten Readiness Guidelines. If monies are not appropriated for this specific effort, the Governor, in collaboration with the Office of Superintendent of Public Instruction, will still move forward in developing voluntary kindergarten readiness guidelines that child care providers, pre-school teachers, kindergarten teachers and parents can use to assess readiness for school in an approach that aligns the goals and interests of the early childhood care and education system with those of the K-12 school system. The guidelines will be

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research based, developmentally appropriate and address social and emotional development, physical development, language and literacy, and cognition and general knowledge. The date for completion of these guidelines is yet to be determined.

• Describe the **domains** of development that the early learning guidelines address or are expected to address, e.g., social, emotional, cognitive, linguistic, and physical. States that have completed early learning guidelines should include a copy as an appendix to the plan. If the guidelines are available on the web, provide the appropriate website address.

Attached please see appendix #??? "Framework for Achieving the Essential Academic Leaning Requirements in Reading Writing Communication—Birth to 5 Years"

• Describe the process the State used or expects to use in **implementing** its early learning guidelines, e.g., feedback and input processes, dissemination, piloting, training in the use of the guidelines, and linkages with other initiatives such as incentives for provider education and training. To what extent is (or was) implementation anticipated in the development of the guidelines? To which child care settings do (or will) the guidelines apply and are the guidelines voluntary or mandatory for each of these settings? How are (or will) community, cultural, linguistic and individual variations, as well as the diversity of child care settings (be) acknowledged in implementation?

Historically, Washington State has used a holistic and inclusive process in short and long-term planning for early learning opportunities for young children. To this end, Washington State will engage appropriate leaders and stakeholders in an input process, dissemination, piloting, and training in the use of Kindergarten Readiness Guidelines. At this time, the Governor's Office and the Office of the Superintendent of Public Instruction have not defined the process for revising the guidelines framework. Additionally, the implementation plan has not been developed. However, a plan for the application of these guidelines will be included in the revision process.

• As applicable, describe the State's plan for **assessing** its early learning guidelines. What will be the focus of the evaluation, i.e., guideline development and implementation, programs or child care settings, and/or outcomes related to children? Will young children's progress be evaluated based on the guidelines? How will assessment be used to improve the State's guidelines, child care programs, plans and outcomes for individual children?

An assessment plan for the Kindergarten Readiness Guidelines will be determined in the development process of the guidelines.

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### Section 5.2.2 - State Plans for Professional Development

• Describe the provider training, technical assistance, and professional development opportunities that are available to child care providers. Are these opportunities available Statewide to all types of providers? If not, please describe.

The Professional Development Initiative – The Governor's Head Start-State Collaboration Office, building upon historical child care and Head Start professional development efforts, sponsored and developed a new initiative that has generated another professional and career development path for Head Start teachers and other early childhood education and care professionals in Washington State. This professional development initiative created a new 90-credit Associate degree that provides 40 credits in General Education and 50 credits of Early Childhood Education content. The professional development initiative is now in the process of obtaining individual college approval for the offering of this new Associate degree. These approvals will be followed by submission to and approval from the State Board for Community and Technical Colleges.

- Does the State have a child care provider professional development **plan**?
  - Yes; if so, identify the entities involved in the development of the plan and whether the plan addresses all categories of providers. As applicable, describe: how the plan includes a continuum of training and education, including articulation from one type of training to the next; how the plan addresses training quality including processes for the approval of trainers and training curriculum; how the plan addresses early language, literacy, prereading, and numeracy development. Indicate whether the plan is linked to early learning guidelines and, if so, how.
  - () No; if no, are steps under way to develop a plan? If so, describe the time frames for completion and/or implementation, steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and numeracy.

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- Are program or provider-level **incentives** offered to encourage provider training and education? If yes, please describe. Include any links between the incentives and training relating to early language, literacy, pre-reading, and numeracy.
- What are the expected outcomes of the State's professional development plan and efforts to improve the skills of child care providers? As applicable, how does (or will) the State assess the effectiveness of its plan and efforts? If so, how does (or will) the State use assessment to help shape its professional development plan and training/education for child care providers?

### Section 5.2.3 - State Plan for Program Coordination

• Does the State have a **plan** for coordination across early childhood programs? If so, is there an entity that is responsible for ensuring that such coordination occurs? Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination. If no, what steps are under way to develop a plan for coordination?

In 1988, the legislature in Washington State created the Child Care Coordinating Committee (RCW 74.13) to bring together people representing components of the early care and education system to:

- a) Serve as an advisory coordinator for all state agencies responsible for early childhood or child care programs for the purpose of improving communication and interagency coordination; and
- b) Annually review state programs and make recommendations to the agencies and the legislature which will maximize funding and promote furtherance of the policies set forth in RCW 74.13.085.

The mission of the Child Care Coordinating Committee (CCCC) is to "improve the availability, affordability and quality of culturally responsive and developmentally appropriate child care and early childhood education in Washington State". In the fall of 2002, to ensure that the CCCC can work efficiently and effectively to achieve its mission, the CCCC voted to task the Systems subcommittee with development of proposed coordination goals for the CCCC over the next 3-5 years as well as a recommended structure to enable the CCCC to accomplish those goals.

With this work underway in the systems subcommittee, a consultant was hired to facilitate the process. As a member of the Systems subcommittee, the Governor's Effective Date: October 1, 2003 50

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Head Start-State Collaboration Office (GHS-SCO) stepped forward with supplemental grant funds to support the Systems subcommittee's initiative to explore/rethink the CCCC current structure and vision.

Because the planning, governing, and accountability of the early learning and out of school time system is determined by multiple leaders and stakeholders, the CCCC is the most efficient and appropriate structure for developing a plan for coordination across early childhood programs.

Describe the results or expected results of this coordination. Discuss how these results
relate to the development and implementation of the State's early learning guidelines,
plans for professional development, and outcomes for children.

In accordance with the Child Care Coordinating Committee statute to bring together people representing components of the early care and education system to:

- a) Serve as an advisory coordinator for all state agencies responsible for early childhood or child care programs for the purpose of improving communication and interagency coordination; and
- b) Annually review state programs and make recommendations to the agencies and the legislature which will maximize funding and promote furtherance of the policies set forth in RCW 74.13.085.

The CCCC will work collaboratively with the Governor's Office to coordinate its plans with the Kindergarten Readiness Guidelines project (development and implementation).

• Describe how the State's plan supports or will support continued coordination among the programs. Are changes anticipated in the plan?

To be determined.

### PART 6 - HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(ONLY THE 50 STATES AND THE DISTRICT OF COLUMBIA COMPLETE PART 6. ONLY TERRITORIES COMPLETE PART 7.)

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the

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licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: http://nrc.uchsc.edu/

## Section 6.1 - Health and Safety Requirements for Center-Based Providers (658E(c)(2)(F), §§98.41, §98.16(j))

- Are all <u>center-based</u> providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:
  - ( ) YES, answer 6.1.2 and proceed to 6.2.
  - (X) NO, answer 6.1.2 and 6.1.3.

Centers that are not subject to licensing must be "certified" as meeting Washington State licensing requirements, or have an approved federal plan in accordance with national or state standards for health and safety standards.

The department may "certify" a day care center for payment if the center is:

- (a) Licensed by a an Indian tribe;
- (b) Certified by the Federal Department of Defense; or
- (c) Approved by the superintendent of public instruction's office.

ECEAP PROGRAMS: ECEAP Programs are not subject to licensing under state law. ECEAP Program Performance Standards (See attachment 25, ECEAP Program Performance Standards) must provide health services using an approach that addresses the individual child's health issues and makes appropriate referrals to family members. Staff and families must work together to remove obstacles to the health and safe development of each child. Health practices must address family needs through a variety of service strategies. These strategies must include:

- Education of children and families concerning effective nutritional and sanitation practices, child safety, medical and dental care, non-violent communication and child abuse;
- Development of environments and practices that minimize injury to emergency situations;
- Education of staff, children and families to recognize and report child abuse;
- Provision of appropriate medical, dental, mental health, nutrition, and therapeutic services indicated by child's status.
- Referral of parents/guardians to appropriate services that address physical, mental, emotional and medical issues not covered by ECEAP services; and

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• Education of parents about advocating for their child's health and safety needs in various community and educational environments.

SEASONAL DAY CAMP PROGRAMS: Seasonal day camp programs for school age care are exempt from licensing but those that have a contract with the State of Washington and provide subsidized child care are eligible for Working Connections Child Care (WCCC) under the following conditions:

- (a) Of a duration of three months or less;
- (b) Engaged primarily in recreational or educational activities; and
- (c) Accredited by the American Camping Association (ACA). (See Attachment 26, American Camping Association Accreditation Standards for Camp Programs and Services).

A total of twenty-one (21) ACA accredited seasonal day camps have received child care subsidy payments in the state. Sixteen sites are in King County, two in Pierce, and one each in Spokane and Kitsap Counties. The American Camping Association is the only nationally recognized camp accreditation program in the United States. The accreditation Standards are rather high and they meet or exceed the standards for quality care.

Seasonal Camps pay a fee to the ACA for the accreditation process, which is proportional to the camp's total operating expense and the number of children to be served. DCCEL receives a verification of the camp's ACA accreditation and issues a certificate based on the ACA's accreditation. The ACA accreditation has been the national and industry standard for camps since 1950. It has high standards that apply to food service, transportation, health and wellness, operational management, human resources and outdoor program activities. In some case the ACA standards exceed the licensing standards

6.1.2		nter licensing requirements as relates to staff-child ratios, group size, or ning been modified since approval of the last State Plan? (§98.41(a)(2)
	( <b>X</b> )	NO YES, and the changes are as follows:

6.1.3 For that center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

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• The prevention and control of infectious disease (including age-appropriate immunizations)

ECEAP PROGRAM: ECEAP Program Performance Standards require ECEAP programs to establish policies and practice to safeguard against children's exposure to and transmission of, infectious diseases in accordance with the Office of Superintendent of Public Instruction (OSPI), Infectious Disease Control Guide for School Staff developed by the Washington State Department of Health. Programs must follow universal safety precautions and follow local requirements for reporting of communicable diseases. Sufficient toilet and hand washing facilities that are readily available and reachable by children must be maintained.

Contractors must comply with state and local sanitation laws and regulations for food preparation and handling, storage, and service including:

- Clean toilets and hand washing facilities that are easily reached by children;
- Preparation of food in an area separate from toilet and hand washing facilities;
- Clean surfaces used for food preparation that are sanitized before and after each snack or meal; and
  - Wearing of non-porous gloves by staff and volunteers when they are in contact with spills of blood or other bodily fluids.

SEASONAL DAY CAMP PROGRAMS: The parent/guardian is responsible for selecting a caretaker who can meet health and safety requirements. However, Seasonal Day Camps standards for health and wellness provide a basis for accreditation through the American Camping Association, Inc. Standards focus on health and safety practices. Accreditation indicates to the public that the camp administration has voluntarily allowed its practices to be compared with the standards established by professionals in the camping industry. At least once every three years an outside team of trained camping professionals visits the accredited camp to verify compliance with the standards. Seasonal Camps are scored on the following criteria:

- First Aid and Emergency Care Personnel;
- Health History;
- Health Care Policies and Procedures;
- Health Care Policy/Procedures Review;
- Contact Information;
- Health Exam:
- Permission to Treat;
- Health Information Review and Screening;
- Informing staff of special needs;
- Health Care Personnel;
- Treatment Procedures;
- Staff Training;

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- Away from main camp (out-of-camp) trips;
- Special Medical Needs;
- Health Care Center;
- Supervision in Health Care Center;
- Parent Notification;
- Medication Management;
- Recordkeeping; and
- Record Maintenance.
- Building and physical premises safety

ECEAP PROGRAM: ECEAP Program Performance Standards require indoor/outdoor facilities must be safe, in good repair, sanitary and barrier free for all children and adults. Appropriate provisions for safe storage of flammable, toxic and hazardous materials must be made. Facilities must include regularly updated and inspected smoke detectors and fire alarms. Flaking or deteriorating lead-based paint must be refinished with lead-free paint or other non-toxic materials. Emergency lighting must be available in each group setting. Spaces occupied by children must be accessible to adults at all times that children are present. Provisions must be made to fence or supervise outdoor play areas sufficiently to prevent children from leaving the premises and wandering into unsafe and unsupervised areas.

Programs located in schools must adhere to the Washington State Primary and Secondary Schools Facilities Standards. All other program locations must follow DSHS Child Care Center Licensing Guidelines. Programs must establish a systematic review of facilities for compliance with safety regulations.

SEASONAL DAY CAMP PROGRAMS: Seasonal Camps are scored on criteria assessing whether or not a site will be accredited using standards listed in the Accreditation Standards for Camp Programs and Services published by the Americam Camping Association, Inc. (See Attachment 26, American Camping Association Accreditation Standards for Camp Programs and Services).

• Health and safety training

<u>ECEAP ROGRAM</u>: ECEAP Program Performance Standards require staff working with children to receive training in child health and safety. Specific training must be provided concerning pediatric emergency first aid and cardiopulmonary resuscitation (by a certified instructor in infant/child CPR, food handling and first aid treatment).

Potential indicators reflecting operation of the standard:

• Staff interviews, written developmental and training plans, program planning materials, program policy and procedure manuals, meeting minutes, individual

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staff development plans and evaluations indicate staff received or will receive training in child health and safety.

- Outlines, agenda's, training notes for health/safety training opportunities are on file and confirm training required by the standard.
- Staff develop plans confirm options and timelines for health and safety training.
- A copy of the CPR instructor's certification is on file.
- Pediatric emergency first aid, cardiopulmonary resuscitation, and food handling certificates for appropriate staff members are on file.

## **SEASONAL DAY CAMP PROGRAMS**: Seasonal Day Camps staff receive training in the camps written procedures to:

- Identify staffs role and responsibilities in camp health care;
- Prepare staff to use health care supplies and equipment with which they will be furnished;
- Identify those situations which should be attended to only by a certified health personnel, and
- Use established sanitary procedures when dealing with infectious waste or body fluids.

In addition, Seasonal Day Camps require providers with the following qualifications to be on duty for emergency care:

- CPR certification from a nationally-recognized provider;
- First Aid certification from a nationally-recognized provider

## Section 6.2 - Health and Safety Requirements for Group Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.2.1	Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:
	<ul><li>( ) YES, answer 6.2.2 and proceed to 6.3.</li><li>( ) NO, answer 6.2.2 and 6.2.3.</li></ul>

Note: Washington State Does Not Use Group Home As A Category of Child Care.

6.2.2	Have group home licensing requirements as relates to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))
	<ul><li>( ) NO</li><li>( ) YES, and the changes are as follows:</li></ul>

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6.2.3	For that group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
	• The prevention and control of infectious disease (including age-appropriate immunizations)
	Building and physical premises safety
	Health and safety training
	<b>6.3 - Health and Safety Requirements for Family Providers</b> (658E(c)(2)(F), 98.16(j))
6.3.1	Are all <u>family</u> child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:
	<ul><li>(X) YES, answer 6.3.2 and proceed to 6.4.</li><li>( ) NO, answer 6.3.2 and 6.3.3.</li></ul>
6.3.2	Have family child care provider requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))
	<ul><li>(X) NO</li><li>( ) YES, and the changes are as follows:</li></ul>

For that family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to

child care services provided under the CCDF for:

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(X) NO

( ) YES, and the changes are as follows:

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Washing	omes that are not subject to licensing must be "certified" as meeting gton State licensing requirements, or have an approved federal plan in nince with national or state standards or standards for health and safety.
a) L	artment may certify a family day care home for payment if the home is: icensed by an Indian tribe; or Certified by the Federal Department of Defense.
	• The prevention and control of infectious disease (including age-appropriate immunizations)
	Building and physical premises safety
	Health and safety training
	6.4 - Health and Safety Requirements for In-Home Providers (658E(c)(2)(F), 98.16(j))
6.4.1	Are all <u>in-home</u> child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation referenced above? If:  ( ) YES, answer 6.4.2 and proceed to 6.5.  (X) NO, answer 6.4.2 and 6.4.3.
6.4.2	Have in-home health and safety requirements that relate to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

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- 6.4.3 For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)

The parent/guardian is responsible for selecting a caretaker who can meet the above requirements and responsibilities. The parent/guardian signs an assurance, that minimum requirements are met. The publication, a *Guide to In-Home/Relative Child Care-DSHS 22-223 (X)* contains a check list for parents who are considering choosing in-home child care. In addition another publication, *Is My Child Safe, Healthy, and Happy – a checklist to help parents and guardians who are considering child care exempt from licensing*, is provided to parents. Authorizing workers give these publications to every client considering the use of in-home child care. (See attachment 23, *A Guide To In-Home/Relative Child Care and attachment 24, Is My Child Safe, Healthy, and Happy)*.

In-home/relative care providers must be: physically, mentally, and emotionally healthy. Child Care Subsidies DSHS 22-877(x) (Rev. 1/01) (See Attachment 12, Child Care Subsidies).

• Building and physical premises safety

The parent/guardian is responsible for selecting an in-home/relative care provider who can meet the above requirements and responsibilities. The parent/guardian signs a DSHS assurance that minimum requirements are met. For child care by in-home/relative care providers, the parent/guardian must assure that the "in-home/ relative care provider or relative is informed about basic health practices, prevention and control of infectious disease, immunizations, and building and physical premises safety, relative to the care of children."

• Health and safety training

The parent/guardian is responsible for selecting a caretaker who can meet the above requirements and responsibilities. The parent guardian signs a DSHS assurance that minimum requirements are met. For child care by inhome caretakers, the parent/guardian must assure that the "in-home caretaker or the relative is informed about basic health practices, prevention

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and control of infectious disease, immunizations, and building and physical premises, safety, relative to the care of children."

In addition, the in-home/relative care provider must submit for clearance a criminal history and background inquiry form. The department compares the criminal background information including pending charges with convictions listed in WAC 388-290-882 and 388-290-886. The department determines if the in-home relative care provider's background contains information that will not allow the authorization of payment towards the cost of child care. If the in-home/relative care provider cannot be cleared, the department notifies the parent and denies or stops payment toward the cost of care for this in-home/relative care provider. The department then assists the parents in finding other child care arrangements. If the in-home/relative care provider has no criminal history information on file, the provider will receive a letter stating they are cleared to provide care.

### Section 6.5 - Exemptions to Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) may be exempted from health and safety requirements (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency's policy regarding these relative providers:

(X) All relative providers are subject to the same requirements as described in sections 6.1 - 6.4 above, as appropriate; there are no exemptions for relatives or different requirements for them.
 ( ) All relative providers are exempt from all health and safety requirements.
 ( ) Some or all relative providers are subject to different health and safety requirements from those described in sections 6.1 - 6.4. The following describes those different requirements and identifies the relatives they apply to:

Note: The only exemption is for immunization requirements for in-home exempt care.

#### Section 6.6 - Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how health and safety requirements are effectively enforced:

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•	1	omplaint investigation or issuance/renewal of a license)?
	()	No
	<b>(X)</b>	Yes, and the following indicates the providers subject to routine unannounced visits and the frequency of those visits.
		unamounced visits and the frequency of those visits.

Licensors make annual unannounced monitoring and inspection visits to Family Child Day Care Homes and Child Care Centers for the purpose of inspecting the home or facility to determine compliance with the Washington Administrative Code (WAC) Minimum Licensing Requirements (MLR'S) and Revised Code of Washington (RCW).

•	Are child	care pro	ovide	rs sub	ject to	backgro	ound checl	xs?			
	( )	No									
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(X) Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):

All providers, assistants, volunteers of licensed child care centers and providers and members of family child care households sixteen years of age or older having unsupervised or regular access to the child in care are required to submit a criminal history and background inquiry form that is processed through the Washington State Patrol. Providers, assistants, volunteers in licensed family child care center and providers, assistants, volunteers and members of family child care households must submit to a fingerprint and FBI process if residing within the State of Washington less than three years. In addition the inquiry information is checked for CPS involvement that would disqualify the person from providing care.

 Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)

( ) No

(X) Yes, and the following describes the State's reporting requirements and how such injuries are tracked (if applicable).

Licensed child care providers are required to report a death of a child, or certain injuries or illnesses that occur on the premises, to Children's Administration Intake. Reportable injuries are those requiring medical treatment, and reportable illnesses are those that require hospitalization of a child in care. All reports of serious injury are screened for investigation.

Accident injury reports are part of the licensing history. If the complaint, upon investigation, is found to rise to the level of child abuse or neglect, that complaint

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## becomes part of the Division of Licensed Resources/Child Protective Services complaint history of the licensed facility

 Other methods used to ensure that health and safety requirements are effectively enforced:

### **Division of Child Care and Early Learning Licensors:**

- Offer orientation sessions to potential and renewing applicants explaining minimum licensing requirements (MLRs);
- Ensure applicants complete necessary processes and paperwork;
- Inspect facilities to determine compliance with Washington Administrative Code (WAC) MLR and Revised Code of Washington(RCW);
- Collaborate with applicants/providers to complete a "Corrective Action Plan" to correct any compliance deficiencies;
- Coordinate with State Fire Marshall's office for meeting fire safety standards;
- Coordinate with Health Surveyor's regarding Health inspections for health certification of child care centers;
- Issue an appropriate facility license within ninety days of receipt of a complete application, or decide to deny the facility application;
- Monitor facilities for compliance with the WAC;
- Investigate complaints against child care facilities and determine plan of correction, if needed. (Abuse and neglect complaints against licensed child care facilities are investigated by specialized investigators in the Division of Licensed Resources.);
- Re-license facilities every three years.

#### **Division of Licensed Resources/Child Protective Services:**

• Investigates complaints about child abuse and neglect in child care facilities.

### **Division of Child Care and Early Learning Health Surveyors:**

- Inspects facilities to determine health and safety compliance with Washington Administrative Code (WAC) and Revised Code of Washington (RCW 74.15), and certifies, denies or revokes health certification;
- Evaluates initial compliance to achieve initial health certification of child care center;
- Surveys child care centers for health and safety concerns referred to them by the DCCEL licensors;
- Coordinates with DCCEL licensors and provides technical assistance to providers, write Statements of Deficiencies and obtains Plans of Correction;
- Re-certifies child care centers for health and safety every 3 years when staffing levels permit; and,

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• May decertify for just cause which is reported to the DCCEL licensors;

Information about licensing requirements is made available through the following vehicles:

- A network of resource and referral agencies throughout the state.
- A publication, "Choosing Child Care: A Consumer Guide for Parents."
- Division of Child Care and Early Learning Staff run orientation sessions for providers around the state at which the Minimum Licensing Requirements are distributed.
- The DSHS quarterly newsletter, the "Link", which goes to all providers, licensors, advocate, and other stakeholders.
- For TANF clients, a video is being developed to inform them about what to look for in choosing child care.
- Minimum Licensing Requirements are posted on the internet website and made available to anyone requesting a copy through the Division of Child Care and Early Learning.

### <u>Section 6.7 – Exemptions from Immunization Requirements</u>

The State assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the State public health agency. (§98.41(a)(1))

The State exempts the following children from immunization (check all that apply):

_X_ Children who are cared for by relatives (defined as grandparents, great grandparents
siblings (if living in a separate residence), aunts and uncles).
_X_Children who receive care in their own homes.
X_Children whose parents object to immunization on religious grounds.
X Children whose medical condition contraindicates immunization.

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### PART 7 - HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

Section 7.1	- Health	and Safety	y Require	ements fo	<u>r Center-Base</u>	ed Providers	in the
<b>Territories</b>	$\overline{(658E(c))}$	$(2)(F), \S 98$	.41(a), §9	98.16(j))			

For all cent services pro

ter-based care, the following health and safety requirements apply to child care rovided under the CCDF for:
<ul> <li>The prevention and control of infectious disease (including age-appropriat immunizations)</li> </ul>
Building and physical premises safety
Health and safety training

### Section 7.2 - Health and Safety Requirements for Group Home Providers in the **Territories** (658E(c)(2)(F), §98.41(a), §98.16(j))

For all group home care, the following health and safety requirements apply to child care services provided under the CCDF for:

> • The prevention and control of infectious disease (including age-appropriate immunizations)

• Building and physical premises safety

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•	Health	and	cafety	training
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## Section 7.3 - Health and Safety Requirements for Family Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

For all <u>family child care</u>, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including ageappropriate immunizations)
- Building and physical premises safety
- Health and safety training

## <u>Section 7.4 - Health and Safety Requirements for In-Home Providers in the Territories</u> $(658E(c)(2)(F), \S 98.41(a), \S 98.16(j))$

For all <u>in-home</u> care, the following health and safety requirements apply to child care services provided under the CCDF for:

• The prevention and control of infectious disease (including age-appropriate immunizations)

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Building and physical premises safety
Health and safety training
Section 7.5 - Exemptions to Territorial Health and Safety Requirements
At Lead Agency option, the following relatives may be exempted from health and safety requirements: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency's policy regarding these relative providers:
( ) All relative providers are subject to the same requirements as described in sections 7.1
7.4 above, as appropriate; there are no exemptions for relatives or different requirements for them.  ( ) All relative providers are exempt from <u>all</u> health and safety requirements.  ( ) Some or all relative providers are subject to <u>different</u> health and safety requirements from those described in sections 7.1 - 7.4 and the following describes those different requirements and the relatives they apply to:
Section 7.6 - Enforcement of Health and Safety Requirements
Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how Territorial health and safety requirements are effectively <u>enforced</u> :
<ul> <li>Are child care providers subject to <u>routine</u> unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?</li> <li>( ) No</li> </ul>
Yes, and the following indicates the providers subject to routine unannounced visits and the frequency of those visits.
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<ul> <li>Are child care providers subject to background checks?         <ul> <li>No</li> <li>Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):</li> </ul> </li> </ul>
<ul> <li>Does the Territory require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)         <ul> <li>() No</li> <li>() Yes, and the following describes the Territory's reporting requirements and how such injuries are tracked (if applicable).</li> </ul> </li> </ul>
Other methods used to ensure that health and safety requirements are effectively enforced:
Section 7.7 – Exemptions from Immunization Requirements
The Territory assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the Territorial public health agency. (§98.41(a)(1))
The Territory exempts the following children from immunization (check all that apply):
Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).  Children who receive care in their own homes.  Children whose parents object to immunization on religious grounds.  Children whose medical condition contraindicates immunization.

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#### CHILD CARE & DEVELOPMENT FUND SERVICES

(FOR THE PERIOD 10/1/03 - 9/30/05)

### **APPENDIX 1 -- PROGRAM ASSURANCES AND CERTIFICATIONS**

The Lead Agency, named in Part 1 of this Plan, assures that:

- upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii)
- with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families.

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#### CHILD CARE & DEVELOPMENT FUND SERVICES

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### The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))
- it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))
- it will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

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#### CHILD CARE & DEVELOPMENT FUND SERVICES

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### **APPENDIX 2 - ELIGIBILITY AND PRIORITY TERMINOLOGY:**

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must define the following *italicized* terms. (658P, 658E(c)(3)(B))

- (1) *job training and educational program -*
  - <u>Basic Education</u> includes High School completion and classes to prepare for and testing to acquire GED certification and may include adult basic education (ABE) or English as a second language (ESL).
  - <u>Vocational Education</u> is training in a specific occupation provided by a technical school or community college administered or certified by the state, or provided by a regionally certified tribal college. It also includes job skills training and pre-employment training in specific skills offered through community-based organizations, businesses and tribal governments.
  - <u>High Wage High Demand</u> is full-time training that will lead to a certificate or degree that will lead to employment in a high wage high demand field.
  - <u>Customized Job Skills Training</u> is full-time individualized or group training for specific jobs with a higher than average starting wage.
  - Job Skills Training is work related foundation job skills not tied to a specific job.
- (2) attending (a job training or educational program; include minimum hours if applicable) -
  - TANF families must participate in TANF WorkFirst approved activities for the amount of time specified in the participant's Individual Responsibility Plan;
  - Non-TANF families must be enrolled and going to a job training or educational program.
- (3) in loco parentis -
  - An adult caring for a minor in the absence of the natural, adoptive or step parent(s) and is:
    - 1) The sibling or step-sibling;
    - 2) Nephew or niece, aunt, uncle, grandparent, or any of the previous relatives with the prefix great, or;
    - 3) Not a relative, court-ordered guardian or custodian. This adult must receive a Washington State Assistance to Needy Families (TANF) grant on behalf of the minor prior to being considered a consumer of Working Connections Child Care (WCCC).
- (4) *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) -
  - Physically, mentally, behaviorally, or emotionally incapable of self-care, as verified by a doctor, nurse, nurse practitioner, or masters-level or above mental health, education, or social service professional.

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- (5) protective services -
  - Family is currently receiving services through Child Welfare Services, Child Protective Services, the Division of Alcohol and Substance Abuse, a homeless or domestic violence shelter. Also, if a child is residing with a relative or foster parent for safety or protective reasons, that child meets the protective services definition for child care or early childhood purposes.
  - "Respite Care Services" means the temporary, planned arrangement for substitute parenting or care-taking of a child. Respite services are typically available to: Provide opportunities to attend overnight training; Provide substitute care in the absence of a caregiver; Allow the caregiver personal time away from home; or to offer relief from parenting and care-giving responsibilities.
- (7) residing with -
  - Living together in the same household or physical structure.
- (7) special needs child -
  - A child under age 19 having a verified physical, mental, emotional, or behavioral condition that requires a higher level of care compared to other children of the same age or is a dependent of the courts and requires adult supervision. Verification must be by a health, mental health, or other educational or medical professional with at least a master's degree.
- (8) *very low income*
  - Anyone at or below 82% of the Federal Poverty Level and/or receiving TANF.
- (9) working (include minimum hours if applicable)
  - TANF families who are engaged in employment or other work-like activities.
  - Non-TANF families who are engaged in paid employment
- (10) Additional terminology related to conditions of eligibility or priority established by the Lead Agency:
  - "Family" means one or more individuals in WAC 388-290-400 who live together in the same household.

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